## **2008 FOR PROFIT CORPORATION**

## **ANNUAL REPORT**

1. Entity Name GLORIA WORLEY, P.A.

DOCUMENT # P01000031309



05-02-2008 90157 004 \*\*\*150.00

May 02, 2008 8:00 am Secretary of State

**FILED** 

Principal Place of Business

Mailing Address

201 SHIRLEYS WAY ST AUGUSTINE, FL 32086

**201 SHIRLEYS WAY** ST AUGUSTINE, FL 32086



## DO NOT WRITE IN THIS SPACE

04242008 No Chg-P CR2E034 (11/05)

4. FEI Number	 Applied For
59-3707110	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

WORLEY, GLORIA 201 SHIRLEYS WAY ST AUGUSTINE, FL 32086

## DO NOT WRITE IN THIS SPACE

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	ions of registered agent.	10-10-10-10-10-10-10-10-10-10-10-10-10-1			oth, in the State of Florida. I am familiar with, and accept		
;	Signature, typed or printed name of registered agent and title i	f applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WORLEY, GLORIA 201 SHIRLEYS WAY SAINT AUGUSTINE, FL 32086						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WORLEY, RICHARD T 201 SHIRLEYS WAY SAINT AUGUSTINE, FL 32086						
TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE		
NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
indicated	on this report or supplemental report is true a	ind accurate and that my signati	ure shall has	e the same legal effe	9. Florida Statutes. 1 further certify that the information ct as if made under oath; that I am an officer or director es; and that my name appears in Block 10 or Block 11 if		

PED OR PRINTED NAME OF GNING OFFICER OR DIRECTOR